

**Iowa Department of Public Health/Division of Behavioral Health
Substance Abuse Central Data Repository (CDR)**

What is the Central Data Repository (CDR)?

The IDPH CDR is a data warehouse that, as of July 1, 2011, contains all state-required substance abuse treatment data elements and allows for electronic submission of the data. The data submitted to the CDR comes from two primary sources:

- Direct data entry by providers into I-SMART, IDPH's customized version of FEI's WITTS web-based data management platform. I-SMART can also be used as a clinical record (working toward electronic health record status) for substance use disorder and problem gambling treatment and for related prevention and recovery support services.
- Extracted data from provider electronic health records which collect the same required reporting data as I-SMART and uploads it to the CDR

What data is collected?

Federal Data – Treatment Episode Data Set (TEDS) which includes National Outcome Measures (NOMS), collected by providers from clients at admission and discharge. Data elements range from Demographics, Drug of Choice, Frequency of Use, and Level of Care through various outcomes such as employment, arrests, etc.

State Data – Five types of data are collected:

- Client Profile – Demographics
- Admission – There are three “forms” all based on the same data set with the only difference being when it is collected (Crisis Intervention; Placement Screening; Admission)
- Services – Treatment and ancillary services provided to the client; includes payor source
- Discharge (completed when the client has been discharged from all services, and include type of discharge, as well as brief 4 question client satisfaction survey)
- Follow-up (completed 6 months post discharge)

Who is the data collected from?

Licensed substance abuse evaluation and treatment programs in Iowa which receive IDPH funding or Medicaid reimbursement or provide OWI evaluations.

What is the data used for?

- IDPH planning
- Iowa Plan performance management and quality improvement, conducted by Magellan on behalf of IDPH
- Surveillance and trend analysis (demographics, drugs of choice, outcome monitoring, etc.)
- Data reporting (legislature, providers, stakeholders, grant applications)
- Federal reporting

What results do you see out of the data?

Monitor the utilization, performance, and outcomes of the substance abuse treatment services provided in Iowa, and project trends and future needs.

What populations do you want to see in the reporting?

All clients who receive substance use disorder services, with specific emphasis on those whose services are funded by IDPH and Medicaid, approximately 50,000 Iowans each year.

What is important for the group to be aware of?

- Of total number of CDR reporters, 24 have integrated the data entry into I-SMART or their EHR processes, so they only collect and report data 1 time.
- A majority of providers collect data from the client on paper or their EHR, then also enter into I-SMART which feeds the data to the CDR.
- Ideal for the consumer and provider is an integrated data collection strategy that gathers and reports the data in one step for the consumer and the provider, and allows funders to access and report on the aggregate data in a timely (real time) way.